## PART B - FEE(S) TRANSMITTAL

Cemplete and send this form, together w

pplicable fee(s), to: Mail

Mail Stop ISS Commissioner for Patents P.O. Box 1450

P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

maintenance fee notification	is			orrespondence damess	, and or (b) maleating a sep	and the Medicus ioi
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
7590 11/18/2005						
Arnold Internatio P.O. Box 129 Great Falls, VA 22			Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
						(Depositor's name)
			•		<del></del>	(Signature)
						(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INVE		VTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/790,882	790,882 03/03/2004		Hiromitsu Yamakawa		25-268	4740
FITLE OF INVENTION: IN	MAGING LENS				,	
APPLN. TYPE	SMALL ENTITY	ISSUE FE	E P	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$0	<u>1</u>	\$0 \$0		02/21/2006
EXAMINER		ART UNI	т с	LASS-SUBCLASS	]	
COLLINS, DARRYL J		2873		359-691000	,	
CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicat PTO/SB/47; Rev 03-02 c Number is required.  ASSIGNEE NAME AND	BE	Correspondence tion form of a Customer E PRINTED ON THe low, no assignee do of this form is NOT	(1) the names of or agents OR, alte (2) the name of a registered attorner 2 registered paten listed, no name with PATENT (print at a will appear on a substitute for filin RESIDENCE: (CIT	single firm (having as a or agent) and the nam attorneys or agents. If Il be printed.	a member a 2etes of up to no name is 3ete is identified below, the content of the con	STEWART  H-& BIRCH LLP  document has been filed for
Please check the appropriate  a. The following fee(s) are  Issue Fee  Publication Fee (No si	assignee category or category	4b. d)	Payment of Fee(s):  A check in the ar  Payment by cred	nount of the fee(s) is en	3 is attached.	
Advance Order - # of Copies			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-2448 (enclose an extra copy of this form).			
a. Applicant claims SN	(from status indicated above MALL ENTITY status. See 3 srequested to apply the Issu blication Fee (if required) wrds of the United States Pate	7 CFR 1.27.	on Fee (if any) or to	re-annly any 100 100 100 100 100 100 100 100 100 10	LL ENTITY status. See 37 C	tion identified above
Authorized Signature			<u> </u>	Date	2-17-06	
Typed or printed name Paul C. Lewis			Registration No. 43368			
n application. Confidentiali	ty is governed by 35 U.S.C.	122 and 37 CFR 1.	<ol><li>This collection i</li></ol>	s estimated to take 12 t	he public which is to file (and minutes to complete, including mments on the amount of ti	no gathering preparing and

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.